

Liquor License Application

City of Kansas City, Mo.
Neighborhoods and Housing Services Department
Regulated Industries Division
635 Woodland Ave., Suite 2101
Kansas City, MO 64106
(816) 513-4561

Applicant's name	e					
DBA business na	ame		Phone _	Phone		
Business address	S					
Applying as a	[] sole owner	Street	City	State ZIP		
Applying as a		[] corporation	[] limited liability company	y [] partnership		
[] Tave gros or plants of production growth and production in the cake [] Lique gross or plants of plant	ern – defined as any list sales from alcoholic lace of entertainment aurant-bar – defined aves 50 percent or more used on the premised and food consumed ataurant-bar under the strange shall be considered as and food. Vention hotel or mote may a meeting room or used to the premised as and food. Vention hotel or mote may a meeting room or used to the premised as an over-the-counter meducts such as candy, contained as and tobacco store – bus forms of tobacco ches, pipe cleaners, are cery store – defined as venience-grocery store the includes but is not limited ware, toys, automotive fectionery store – defined as and other baked good for store – defined as and other baked goo	deensed premises that a beverages and does not be a sany establishment he of its annual gross sands, or which has an annual gross sands, or which has an annual on the premises. For provisions of this characted meals and food, and to be part of the allocations as well as officiations as a retail storated to bacco accessory and pipe tampers as a retail store that prime — defined as a small limited to groceries, since we products and food ined as a retail business to sweets, candies, candies are tail business to sweets, candies, candies are tail business that prime — defined as a retail business that prime — defined — d	of business to be licensed sells liquor by the drink which derilated qualify to be categorized as a restaining a restaurant or similar facilitiales from the sale of prepared meal ual gross sales of at least \$200,000 the purposes of determining wheth pter and calculating the amount and any nonalcoholic components mixed coholic beverage and shall not be deleted or motel containing not less than a seating capacity of not less than 5 atturing a pharmacy that dispenses ther miscellaneous items which includes, light refreshments, magazine of tobacco products which primary products which includes but is not marily sells food. I retail business that primarily stocknack foods, confectionery, toiletrie ill business that sells a number of light and accessories, furniture and homes that primarily sells bakers and sundied nuts, chocolates, chewing guarinarily sells pre-packaged alcohological pre-packaged alcohol	y on the premises which is and food made and and and and and and of from the sale of preparer an establishment qualified percentage of annual greed or served in any alcohologous development of the prepared and the present of the prepared and prescription medication and the prescription	red fies as oss olic , , ms	
2. Proposed day	s and hours of operati	on				
3. The business	will provide the follo	wing [] breakfast	[] lunch [] dinner [] no	t applicable		
[] change in o [] original liq [] Sunday liqu [] upgrade of	uor license [] ex nor license [] si license [] m	ng liquor licensed bus cpansion of premises dewalk café (restaurar	ended hours (3 a.m.) liquor permit	ransfer of location hange of managing office	r)	

The application fee for each item checked above must be submitted with the application – see the corresponding checklist for the listed application fee (if any)

]]]]	Type of license for which you are applying (check all that apply)] full retail sales-by-drink [] malt liquor/light wine sales-by-drink (14% alcohol or less)] full retail sales-by-drink specialty [] malt liquor sales-by-package (5% alcohol or less - Sunday license included)] full retail sales-by-package [] full alcoholic beverage wholesaler (sales to retailers or wholesalers)] 22% or less alcoholic beverage wholesaler (sales to retailers or wholesalers)[] 5% or less malt liquor wholesaler (sales or retailers or wholesalers) [] full liquor manufacturer [] wine manufacturer [] microbrewery
If	you are applying for a <i>package</i> license, do you also want a tasting license? [] yes [] no
	If you are applying for a <i>Sunday license</i> , please indicate the license type] Retail sales-by-drink Sunday [] Retail sales-by-package Sunday [] not applicable
	If you are applying for an <i>extended hour's permit</i> , please indicate business type] Retail sales-by-drink business [] Retail sales-by-drink convention hotel/motel [] not applicable
] []	Indicate all entertainment to be provided. If you are applying for a <u>change</u> in entertainment, indicate new additions only] video games / amusement devices [] pool table [] darts [] pinball [] jukebox] dancing/dance hall [] DJ [] semi-nude dancers (must have zoning clearance)] live music] live entertainment (describe)
0	Outdoor entertainment provided: [] DJ [] live music [] dancing [] other
Т	otal number of all <i>multi</i> coin-operated amusement devices (A multi coin-operated machine or device is one which is capable of being played by the insertion therein of more than one coin, disc or other insertion piece, or operated thereby winning free plays or free games, or for the purpose of increasing the number of free plays or free games which may be won)
T	otal number of billiard/pool tables Total number of all <i>other</i> coin-operated amusement devices
9.	Interior occupant capacity Exterior occupant capacity (if used for customer seating)
10.	Interior square feet Exterior square feet how many <i>total</i> floors will be licensed?
	Will one or more exterior patio(s) be licensed? [] yes [] no Location(s) (circle) north south east west
	Will one or more exterior deck(s) be licensed? [] yes [] no Location(s) north south east west roof
	This section ONLY: Current licensees please write "on file" next to any question where applicable
11.	Managing officer's name E-mail address
	Home phone Work phone Mobile phone
	Address
	Street City State ZIP
12.	Do you currently or intend to employ any person who has been convicted of a felony? [] yes [] no
	If yes, give details
13.	Do you own or intend to purchase this business? [] yes [] no If yes, provide the following information
	Date of purchase Purchase price \$
14.	Do you rent or lease the premise? [] yes [] no If yes, provide the following information
	Landlord's name Daytime Phone
	Address Street City State ZIP
	Monthly rent or lease payment amount \$ Term of rent or lease agreement
15	Property owner's name
10.	Address
	Street City State ZIP
	Financial information
16.	Total investment amount to set up the proposed business \$
	Source of funds

17.	List the names of all person(s), firms or corporations that have provided or will provide money to purchase or set up this business and indicate amounts					
18.	Does or will the former owner have any interest, directly or indirectly, in this business? [] yes [] no [] n/a					
	If yes, give details					
19.	Does your landlord have any interest, directly or indirectly, in this business? [] yes [] no [] n/a					
	If yes, give details					
	List all corporations, limited liability companies and partnerships for which you and all owners of this business (the members of the corporation, LLC or partnership) are members or are directly or indirectly involved					
	If the business is a corporation , complete this section					
21.	Name of corporation					
	State of incorporation Date of incorporation					
22.	List the names and titles of all corporate officers (attach additional sheet if necessary)					
23.	List the names with the number of shares and percentages held by each stockholder who holds 10 percent or more of the capital stock (attach additional sheet if needed)					
24.	Name of limited liability company					
	State of organization					
25.	List the names of all members and percentages of each LLC member's interest (attach additional sheet if needed)					
	If the business is a partnership , complete this section					
	List names of general and limited partners, and the number of units owned by each (attach additional list if necessary)					

No distiller, wholesaler, winemaker, brewer or supplier of coin-operated amusement devices or the employees, officers or agents thereof have any financial interest in the business and I will not accept from any such person(s), equipment, money, credit or property of any kind except ordinary commercial credit for liquor sold.

This application is not being made as a subterfuge to allow a person, other than myself, to obtain a license to sell alcoholic beverages in my name for his or her benefit.

I agree to promptly report any changes in the information within this application to the Manager of Regulated Industries Division.

I authorize and consent to the examination, by the Manager of Regulated Industries Division and/or his authorized representatives, of my business books, bank accounts and other records to verify the source of funds and terms under which this business is being purchased.

I agree to allow the Manager of Regulated Industries Division and/or authorized representatives to conduct necessary investigations into financial and possible criminal records at banks and police agencies respectively.

I will at all times permit the entry of any officer or investigator who may have legal authority of the purpose of inspection or search, and will permit the removal of all things and articles that may be in violation of the Code of Ordinances of the City of Kansas City, Missouri, and the laws of the State of Missouri.

I agree to comply with the provisions of Chapters 10 and 50 of the Code of Ordinances of the City of Kansas City, Missouri, and I will not violate any ordinances of the city, laws of the state or laws of the United States in the conduct of the business.

If I receive a sidewalk café permit, I will abide by section 64-168(c)(2) of the Code of Ordinances of the City of Kansas City, Missouri, as I agree to defend, indemnify, and hold harmless the city and any of its agencies, officials, officers, or employees from and against all claims, damages, liability, losses, costs, and expenses, including reasonable attorneys' fees, arising out of or resulting from any acts or omissions in connection with the operations of the applicant caused in whole or in part by the applicant, its employees, agents, or subcontractors, customers or caused by others for whom the applicant is liable, regardless of whether caused in part by any act or omission of city, its agencies, officials, officers, or employees.

, being of lawful age and duly sworn upon my oath, dat I have read the application and fully understand same and that I know the contents thereof and the answer					
statements contained therein and the same are		know the contents thereof and the unswers and			
Applicant's Signature		 Date			
OFFICE USE ON	LY – DO NOT WRITE IN	SPACE BELOW			
	INVESTIGATOR	_			
Application recommended for: [] Appro	oval [] Disapproval	Date:			
Comments:					
	/				
T' 1.16 F.1A 1.		D. (
License recommended for: [] Approval	[] Disapprovai	Date:			

INVESTIGATIONS SUPERVISOR						
Application recommended for:	[] Approval	[] Disapproval	Date:			
Comments:						
License recommended for:	[] Approval	[] Disapproval	Date:			
Comments:						
Regulated Industries Division	Investigations Su	pervisor				
C	C	1				
	А	SSISTANT MANAGEI	R			
Application recommended for:	[] Approval	[] Disapproval	Date:			
Comments:						
License recommended for:	[] Approval	[] Disapproval	Date:			
Comments:						
Regulated Industries Divisi	on Assistant Man	ager				
		MANAGER				
This application & license are he	reby: [] Ap	proved [] Disa	approved			
Comments:						

Date

Regulated Industries Division Manager